

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF IMPERIAL 939 Main Street El Centro, CA 92243	
PETITIONER: RESPONDENT:	
DECLARATION REGARDING EX PARTE NOTICE	CASE NUMBER:

Opposing party (or attorney if represented):

- a. Name: _____
 b. Address: _____
 c. Phone Number: _____

DECLARATION REGARDING NOTICE

- The undersigned ☐ **has** ☐ **has not** made any prior applications on the same issue in this case or another case.
- If there has been another case, fill in the County in which the case is pending:
 County: _____ Case number: _____.
- This order ☐ **will** ☐ **will not** result in a change of the status quo.
- I have given notice of the ex parte application to the other party/attorney by the following method at least by 10:00 a.m. the previous day set for the hearing:

By: ☐ Personal Delivery ☐ Fax with confirmation of receipt
☐ First Class Mail ☐ Telephone
☐ Other (explain): _____

Date and time I gave notice _____
 (Date) (Time)

- The other party or their attorney ☐ has or ☐ has not confirmed receipt of the motion (state details)

DECLARATION REGARDING EX PARTE NOTICE

PETITIONER:	CASE NUMBER:
RESPONDENT:	

6. ☐ I gave notice that I would present this application for these orders on _____ at _____ am/pm in Department _____ of the Superior Court, 939 Main Street, El Centro, CA.
7. ☐ I anticipate the other party will oppose this application. ☐ I do not anticipate the other party will oppose this application.
8. If this is not an application under the Domestic Violence Protection Act, **I have not given notice** to the _____ other party or attorney for the following reasons (See Local Rule 5.1(e)):

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Dated: _____

Signature of Declarant